

PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

02/23/2026

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2022 OF THE CONDITION AND AFFAIRS OF THE

Pawtucket Insurance Company
4861 4861 NAIC Company Code 14931 Employer's ID Number

NAI	C Group Code			NAIC Company Code	14931	Employer's ID Nu	umber _	05-0197250
Organized under the Laws of	f		Prior) Island	St	ate of Domici	ile or Port of Entry		RI
Country of Domicile		Trilode	isiariu	United States of		ile of Fort of Entry		IXI
					_			
Incorporated/Organized		06/19/1848			Commence	d Business		02/10/1849
Statutory Home Office	13	01 Atwood Ave,	Suite 316	ŝE, _				RI, US 02919
		(Street and Nu	ımber)			(City or To	wn, State, (Country and Zip Code)
Main Administrative Office				1301 Atwood Ave,	Suite 316E			
				(Street and N	umber)			
(City)	Johnston, Ri or Town, State, C		'ode)			(Агеа		25-5600 lephone Number)
(Oity C	or rown, state, c	ountry and Zip C	oue)			(Alea	Code) (Tel	repriorie Number)
Mail Address		P.O. Box 9950	0.5.					RI, US 02940
	(Street a	nd Number or P.	O. Box)			(City or To)	wn, State, 0	Country and Zip Code)
Primary Location of Books ar	nd Records _			1301 Atwood Ave	Suite 316E			
	1.1			(Street and N	umber)		404.70	5 5000
(City o	Johnston, Rl or Town, State, C		code)			(Area		25-5600 lephone Number)
(Oity C	51 TOWN, Oldio, C	ountry and zip c	,ouc,			(, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0000) (10	iophone (value)
Internet Website Address				www.nbic.	com			
Statutory Statement Contact		Michael	McNar	mara	,		40	01-495-8925
•			(Name)			(.) (Telephone Number)
	mmcnamara							95-8914 lumber)
	(E-mail A	duress)					(FAX N	idiliber)
				OFFICE	RS			
Chief Executive Offier		Ernie Jose (Garateix			President		Timothy Michael Moura
Chief Financial Officer		Kirk Howar	d Lusk			Secretary		Kirk Howard Lusk
				OTHE	₹			
				DIRECTORS OR	TRUSTEES			
	ose Garateix i Barlas			Richard Alexander Joseph Shanju V				Vijay Shankarrao Walvekar
	i Danas			оозерн опанја у	attamattam			
State of	Rhode Islai	nd		.0				
County of	Providenc			iS				
The officers of this reporting	entity being duly	sworn, each der	ose and	say that they are the d	escribed office	cers of said reportir	ng entity, ar	nd that on the reporting period stated above
								reon, except as herein stated, and that this
								ent of all the assets and liabilities and of the the period ended, and have been completed
in accordance with the NAIC	Annual Statem	ent Instructions a	and Acco	unting Practices and F	Procedures m	nanual except to the	e extent the	at: (1) state law may differ; or, (2) that state
								of their information, knowledge and beliefing with the NAIC, when required, that is ar
								by various regulators in lieu of or in addition
to the enclosed statement.								
				10.1.1.				
Ernie Jose G Chief Executiv				Kirk Howard Chief Financia				Timothy Michael Moura President
Office Executiv	o omoor			Omer i maricia	. Onioci			resident
O. K. J. Williams						an original filing?		Yes [X] No []
Subscribed and sworn to bef day o		Fehrus	ary 2023		b. If no, 1 Stat	te the amendment	number	
day 0	'	i ebiu	a. y 2020		_	e filed		
						nber of pages attac		
Bethany Anne Dwyer								



EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

	NAIC Group Code 4861 BUSINESS II	N THE STATE C	F Pennsylvan			LUSSES			RING THE YEAR	R 2022	NAIC Com	npany Code 14	4931
		Policy and Me Less Return I Premiums on Po	Premiums and plicies not Taken 2	3 Dividends Paid or Credited to	4	5	6	7	8 Direct Defense and Cost	9 Direct Defense and Cost	10 Direct Defense and Cost Containment	11 Commissions	12
	Line of Business	Direct Premiums Written	Direct Premiums Earned	Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Containment Expense Paid	Containment Expense Incurred	Expense Unpaid	and Brokerage Expenses	Taxes, Licenses and Fees
	Fire												
	Allied Lines												
	Federal Flood												
	Private Crop												
	Private Flood												
	Farmowners Multiple Peril												
4.	Homeowners Multiple Peril					(3,576)	(3,576)						
	Commercial Multiple Peril (Non-Liability Portion)												
5.2 6.	Commercial Multiple Peril (Liability Portion)												
8.	Ocean Marine												•••••
9.	Inland Marine												
10.	Financial Guaranty												
	Medical Professional Liability - Occurrence												
	Medical Professional Liability - Claims-Made												
12.	Earthquake												
	Comprehensive (hospital and medical) ind (b)			•••••									
	Comprenensive (nospital and medical) group (b)												
	Vision Only (b)												
	Dental Only (b)												
15.3	Disability Income (b)												
	Medicare Supplement (b)												
	Medicaid Title XIX (b)												
	Medicare Title XVIII (b)												
	Long-Term Care (b) Federal Employees Health Benefits Plan (b)												
	Other Health (b)												
	Workers' Compensation												
17.1	Other Liability - Occurrence												
	Other Liability - Claims-Made												
	Excess Workers' Compensation												
	Products Liability - Occurrence												
	Products Liability - Claims-Made												
	Other Private Passenger Auto Liability												•••••
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage												
	Commercial Auto Physical Damage												
	Aircraft (all perils)												
23. 24.	Suretv		·····		·····								
26.	Burglary and Theft												
27.	Boiler and Machinery												
28.	Credit												
29.	International												
30.	Warranty												
31. 32.	Reins nonproportional assumed property	XXXXXX	XXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX	XXXXXX
32. 33.	Reins nonproportional assumed financial lines	xxx	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXXXXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	
35.	Total (a)	0	0	0	0	(3,576)	(3,576)	0	0	0	0	0	(
	DETAILS OF WRITE-INS						, , , , ,						
3401.													
3402.													
3403.	Common of remaining units inc feet line 24 from everylay												,
3498. 3499.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	
J499.	rotais (Lines 340 i tillu 3403 pius 3430)(Line 34 above)	1 0	l U	U		U	U	0	1 0	1 0	U	1 0	1



EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

	NAIC Group Code 4861 BUSINESS IN		F Grand Total						RING THE YEAF				
		Gross Premiu Policy and Mer Less Return F Premiums on Po	Premiums and licies not Taken	Dividends Paid	4	5	6	7	8 Direct Defense	9 Direct Defense	10 Direct Defense and Cost	pany Code 14	12
	Line of Business	1 Direct Premiums Written	2 Direct Premiums Earned	or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)		Direct Losses Unpaid	and Cost Containment Expense Paid	and Cost Containment Expense Incurred	Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.		0	0	0	0	0	0	0	0	0	0	0	
2.1	Allied Lines			٠					0		0	0	
	Federal Flood					0		n		0		n	
	Private Crop	0	0	0	0	0	0	0	0	0	0	0	
	Private Flood	0	0	0	0	0	0	0	0	0	0	0	
3.	Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	
4.	Homeowners Multiple Peril	0	0	0	0	(3,576)	(3,576) 0	0	0	0	0	
5.1	Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	
	Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	
6. 8.	Mortgage Guaranty Ocean Marine	0	0			0	0	0	0	0	0		
o. 9.	Inland Marine	0	n		n	n	n	n	n	n	n	n	
10.	Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	
11.1	Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	
11.2	Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	
	Earthquake	0	0	0	0	0	0	0	0	0	0	0	
13.1	Comprehensive (hospital and medical) ind (b)	0	0	0	J0	<u>0</u>	0	0	0	0	0	0	
13.2	Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	• • • • • • • • • • • • • • • • • • • •
	Credit A&H (Group and Individual)	0	0			0	0	0	0	0	0		
	Dental Only (b)	0		٠١		0				n	۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰	n	
	Disability Income (b)	0	0		0	0	0	0	0	0	0	0	
15.4	Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	
	Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	
	Medicare Title XVIII (b)	0	0	0	0	0	0	0	0	0	0	0	
	Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	
	Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	
	Other Health (b)	0	0	0	J	0	0	0	0	0	0	0	
	Other Liability - Occurrence	0		٠١		0				n	۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰۰	n	
	Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	
	Excess Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	
	Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	
18.2	Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	
19.2	Other Private Passenger Auto Liability Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	
19.3	Other Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	J	0	0	0	0	0	0	0	
21 1	Private Passenger Auto Physical Damage	0 n	u			,			U		u		
21.2	Commercial Auto Physical Damage	0	0	0		0	0	0	0	0	0	0	
22.	Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	
23.	Fidelity	0	0	0	0	0	0	0	0	0	0	0	
24.	Surety	0	0	0	0	0	0	0	0	0	0	0	
26.	Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	
27.	Boiler and Machinery	0	0	0	J0	0	0	0	0	0	0	0	
28.	Credit	0	0	0	J	. ō]0	₀	0	0	0	J	
29. 30.	International	u	u		J				n	n	n	n	
	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0			0	0	0	0	
35.	Total (a)	0	0	0	0	(3,576)	(3,576) 0	0	0	0	0	
	DETAILS OF WRITE-INS				1			1					
3401.					····			· · · · · · · · · · · · · · · · · · · ·					
3402. 3403.					·····			·					
3403. 3498.	Summary of remaining write-ins for Line 34 from overflow page	n	n	n	n	n	n	n	n	n	n	n	
	Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	

Schedule F - Part 1 - Assumed Reinsurance

NONE

Schedule F - Part 2 - Premium Portfolio Reinsurance Effected or (Canceled)

NONE

Schedule F - Part 3 - Ceded Reinsurance

NONE

Schedule F - Part 4 - Issuing or Confirming Banks for Letters of Credit from Schedule F, Part 3

NONE

Schedule F - Part 5 - Interrogatories for Schedule F - Part 3

NONE

Schedule F - Part 6 - Restatement of Balance Sheet to Identify Net Credit for Reinsurance

NONE

Schedule H - Part 1 - Analysis of Underwriting Operations

NONE

Schedule H - Part 2 - Reserves and Liabilities

NONE

Schedule H - Part 3 - Test of Prior Year's Claim Reserves and Liabilities

NONE

Schedule H - Part 4 - Reinsurance

NONE

Schedule H - Part 5 - Health Claims

NONE

SCHEDULE P - PART 1A - HOMEOWNERS/FARMOWNERS

		Pr	emiums Earne	ed		ζ,	Los	s and Loss Ex	cpense Payme	ents			12
_	ears in	1	2	3				and Cost		and Other	10	11	
	/hich				Loss Pa			nt Payments		nents			Number of
	ıms Were				4	5	6	7	8	9		Total Net	Claims
	ned and										Salvage and		Reported
	es Were	Direct and			Direct and		Direct and		Direct and			(4 - 5 + 6 - 7	Direct and
Inc	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1.	Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2.	2013	0	0	0	0	0	0	0	0	0	0	0	0
3.	2014	0	0	0	0	0	0	0	0	0	0	0	0
4.	2015	0	0	0	0	0	0	0	0	0	0	0	0
5.	2016	0	0	0	0	0	0	0	0	0	0	0	0
6.	2017	0	0	0	0	0	0	0	0	0	0	0	0
7.	2018	0	0	0	0	0	0	0	0	0	0	0	0
8.	2019	0	0	0	0			0	0	0	0	0	0
9.	2020	0	0	0	(2,060)	0	0	0	0	0	2,060	(2,060)	0
10.	2021	0	0	0	0	0	0	0	0	0	0	0	0
11.	2022	0	0	0	0	0	0	0	0	0	0	0	0
12.	Totals	XXX	XXX	XXX	(2,060)	0	0	0	0	0	2,060	(2,060)	XXX

			Losses	Unpaid		Defens	e and Cost (Containment	Unpaid	Adiust	ng and	23	24	25
		Case		Bulk +	· IBNR		Basis		BNR	Other				
		13	14	15	16	17	18	19	20	21	22	Salvage and	Total Net Losses	Number of Claims Outstand-
		Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Subrog- ation Anticipated	and Expenses Unpaid	ing Direct and Assumed
1.	Prior	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	2013	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	2014	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	2015	0	0	0	0	0	0	0	0	0	0	0	0	0
5.	2016	0	0	0	0	0	0	0	0	0	0	0	0	0
6.	2017	0	0	0	0	0	0	0	0	0	0	0	0	0
7.	2018	0	0	0	0	0	0	0	0	0	0	0	0	0
8.	2019	0	0	0	0	0	0	0	0	0	0	0	0	0
9.	2020	0	0	0	0	0	0	0	0	0	0	0	0	0
10.	2021	0	0	0	0	0	0	0	0	0	0	0	0	0
11.	2022	0	0	0	0	0	0	0	0	0	0	0	0	0
12.	Totals	0	0	0	0	0	0	0	0	0	0	0	0	0

			Total		Loss and L	oss Expense F	Percentage			34	Net Balar	nce Sheet
		Losses and	d Loss Expense	es Incurred		ed /Premiums I		Nontabula	r Discount			ter Discount
		26	27	28	29	30	31	32	33	Inter-	35	36
		Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Company Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1.	Prior	xxx	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	2013	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3.	2014	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4.	2015	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5.	2016	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6.	2017	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7.	2018	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8.	2019	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9.	2020	(2,060)	0	(2,060)	0.0	0.0	0.0	0	0	0.0	0	0
10.	2021	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11.	2022	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

SCHEDULE P - PART 1B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

		Pr	emiums Earne	ed		ζ,	Los	s and Loss Ex	cpense Payme	ents			12
	ears in	1	2	3				and Cost		and Other	10	11	
	/hich				Loss Pa			t Payments		nents			Number of
	ums Were				4	5	6	7	8	9		Total Net	Claims
	ned and										Salvage and		Reported
	es Were	Direct and			Direct and		Direct and		Direct and			(4 - 5 + 6 - 7	
Ind	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1.	Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2.	2013	0	0	0	0	0	0	0	0	0	0	0	0
3.	2014	0	0	0	0	0	0	0	0	0	0	0	0
4.	2015	0	0	0	0	0	0	0	0	0	0	0	0
5.	2016	0	0	0	0	0	0	0	0	0	0	0	0
6.	2017	0	0	0	0	0	0	0	0	0	0	0	0
7.	2018	0	0	0	0	0	0	0	0	0	0	0	0
8.	2019	0	0	0	0	0	0	0	0	0	0	0	0
9.	2020	0	0	0	0	0	0	0	0	0	0	0	0
10.	2021	0	0	0	0	0	0	0	0	0	0	0	0
11.	2022	0	0	0	0	0	0	0	0	0	0	0	0
12.	Totals	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX

												23	24	25
				Unpaid			e and Cost C				ng and			
		Case		Bulk +			Basis		- IBNR	Other				
		13	14	15	16	17	18	19	20	21	22	Salvage and	Total Net Losses	Number of Claims Outstand-
		Direct		Direct		Direct		Direct		Direct		Subrog-	and	ing
		and	0.4.4	and	0.1.1	and	0.1.1	and	0	and	0.4.4	ation	Expenses	Direct and
-		Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
1.	Prior	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	2013	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	2014	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	2015	0	0	0	0	0	0	0	0	0	0	0	0	0
5.	2016	0	0	0	0	0	0	0	0	0	0	0	0	0
6.	2017	0	0	0	0	0	0	0	0	0	0	0	0	0
7.	2018	0	0	0	0	0	0	0	0	0	0	0	0	0
8.	2019	0	0	0	0	0	0	0	0	0	0	0	0	0
9.	2020	0	0	0	0	0	0	0	0	0	0	0	0	0
10.	2021	0	0	0	0	0	0	0	0	0	0	0	0	0
11.	2022	0	0	0	0	0	0	0	0	0	0	0	0	0
12.	Totals	0	0	0	0	0	0	0	0	0	0	0	0	0

			Total		Loss and L	oss Expense F	Percentage			34	Net Balar	ce Sheet
		Losses and	d Loss Expense	es Incurred		ed /Premiums E		Nontabula	r Discount		Reserves Af	
		26	27	28	29	30	31	32	33	Inter-	35	36
		Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Company Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1.	Prior	xxx	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	2013	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3.	2014	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4.	2015	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5.	2016	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6.	2017	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7.	2018	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8.	2019	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9.	2020	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10.	2021	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11.	2022	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

SCHEDULE P - PART 1C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

		Pr	emiums Earne	ed		ζ,	Los	s and Loss Ex	cpense Payme	ents			12
	ears in	1	2	3				and Cost		and Other	10	11	
	/hich				Loss Pa			t Payments		nents			Number of
	ums Were				4	5	6	7	8	9		Total Net	Claims
	ned and										Salvage and		Reported
	es Were	Direct and			Direct and		Direct and		Direct and			(4 - 5 + 6 - 7	
Ind	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1.	Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2.	2013	0	0	0	0	0	0	0	0	0	0	0	0
3.	2014	0	0	0	0	0	0	0	0	0	0	0	0
4.	2015	0	0	0	0	0	0	0	0	0	0	0	0
5.	2016	0	0	0	0	0	0	0	0	0	0	0	0
6.	2017	0	0	0	0	0	0	0	0	0	0	0	0
7.	2018	0	0	0	0	0	0	0	0	0	0	0	0
8.	2019	0	0	0	0	0	0	0	0	0	0	0	0
9.	2020	0	0	0	0	0	0	0	0	0	0	0	0
10.	2021	0	0	0	0	0	0	0	0	0	0	0	0
11.	2022	0	0	0	0	0	0	0	0	0	0	0	0
12.	Totals	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX

						5.6						23	24	25
		Case		Unpaid Bulk +	IDND	Defens	e and Cost (Containment Bulk +			ng and Unpaid			
		13	14	15	16	17	18	19	20	21	22			Number
		10	1-7	10	10		10	10	20			Salvage	Total Net	of Claims
												and	Losses	Outstand-
		Direct		Direct		Direct		Direct		Direct		Subrog-	and	ing
		and Assumed	Ceded	and Assumed	Ceded	and Assumed	Ceded	and Assumed	Ceded	and Assumed	Ceded	ation Anticipated	Expenses Unpaid	Direct and Assumed
		7100011100	Ocucu	7133411104		7100011100	Ocucu	7133411104	Ocaca	7100011100	Ocaca		Oripaid	7100011100
1.	Prior	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	2013	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	2014	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	2015	0	0	0	0	0	0	0	0	0	0	0	0	0
5.	2016	0	0	0	0	0	0	0	0	0	0	0	0	0
6.	2017	0	0	0	0	0	0	0	0	0	0	0	0	0
7.	2018	0	0	0	0	0	0	0	0	0	0	0	0	0
8.	2019	0	0	0	0	0	0	0	0	0	0	0	0	0
9.	2020	0	0	0	0	0	0	0	0	0	0	0	0	0
10.	2021	0	0	0	0	0	0	0	0	0	0	0	0	0
11.	2022	0	0	0	0	0	0	0	0	0	0	0	0	0
12.	Totals	0	0	0	0	0	0	0	0	0	0	0	0	0

1			Total		Loss and I	oss Expense F	Porcontago	1		34	Net Balar	nco Shoot
		Losses and	d Loss Expense	es Incurred		ed /Premiums E		Nontabula	r Discount	34		ter Discount
		26	27	28	29	30	31	32	33	Inter- Company	35	36
		Direct and			Direct and				Loss	Pooling Participation	Losses	Loss Expenses
		Assumed	Ceded	Net	Assumed	Ceded	Net	Loss	Expense	Percentage	Unpaid	Unpaid
1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	2013	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3.	2014	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4.	2015	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5.	2016	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6.	2017	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7.	2018	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8.	2019	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9.	2020	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10.	2021	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11.	2022	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

SCHEDULE P - PART 1D - WORKERS' COMPENSATION (EXCLUDING EXCESS WORKERS' COMPENSATION)

		Pr	emiums Earn	ed		•	Los	s and Loss Ex	pense Payme	ents			12
	ears in	1	2	3				and Cost	Adjusting		10	11	
	Vhich				Loss Pa			nt Payments		nents			Number of
	ums Were				4	5	6	7	8	9		Total Net	Claims
	ned and	l									Salvage and		Reported
	es Were	Direct and	0-4-4	Not (4 O)	Direct and	0-4-4	Direct and	0-4-4	Direct and	0-4-4		(4 - 5 + 6 - 7	Direct and
ind	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1.	Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2.	2013	0	0	0	0	0	0	0	0	0	0	0	0
3.	2014	0	0	0	0	0	0	0	0	0	0	0	0
4.	2015	0	0	0	0	0	0	0	0	0	0	0	0
5.	2016	0	0	0	0	0	0	0	0	0	0	0	0
6.	2017	0	0	0	0	0	0	0	0	0	0	0	0
7.	2018	0	0	0	0	0	0	0	0	0	0	0	0
8.	2019	0	0	0	0	0	0	0	0	0	0	0	0
9.	2020	0	0	0	0	0	0	0	0	0	0	0	0
10.	2021	0	0	0	0	0	0	0	0	0	0	0	0
11.	2022	0	0	0	0	0	0	0	0	0	0	0	0
12.	Totals	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX

						5.6						23	24	25
		Case		Unpaid Bulk +	IDND	Defens		Containment Bulk +			ng and Unpaid			
		13	14	15	16	17	18	19	20	21	22			Number
		Direct and		Direct and		Direct and		Direct and		Direct and		Salvage and Subrog- ation	Total Net Losses and Expenses	of Claims Outstand- ing Direct and
		Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
1.	Prior	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	2013	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	2014	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	2015	0	0	0	0	0	0	0	0	0	0	0	0	0
5.	2016	0	0	0	0	0	0	0	0	0	0	0	0	0
6.	2017	0	0	0	0	0	0	0	0	0	0	0	0	0
7.	2018	0	0	0	0	0	0	0	0	0	0	0	0	0
8.	2019	0	0	0	0	0	0	0	0	0	0	0	0	0
9.	2020	0	0	0	0	0	0	0	0	0	0	0	0	0
10.	2021	0	0	0	0	0	0	0	0	0	0	0	0	0
11.	2022	0	0	0	0	0	0	0	0	0	0	0	0	0
12.	Totals	0	0	0	0	0	0	0	0	0	0	0	0	0

			Total			oss Expense F				34	Net Balar	
			Loss Expense			ed /Premiums I		Nontabula				ter Discount
		26	27	28	29	30	31	32	33	Inter-	35	36
		Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Company Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	2013	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3.	2014	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4.	2015	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5.	2016	0	0	0	0.0	0.0	0.0	0	0		0	0
6.	2017	0	0	0	0.0	0.0	0.0	0	0	0.0	0	C
7.	2018	0	0	0	0.0	0.0	0.0	0	0	0.0	0	C
8.	2019	0	0	0	0.0	0.0	0.0	0	0	0.0	0	C
9.	2020	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10.	2021	0	0	0	0.0	0.0	0.0	0	0	0.0	0	
11.	2022	0	0	0	0.0	0.0	0.0	0	0	0.0	0	C
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	C

SCHEDULE P - PART 1E - COMMERCIAL MULTIPLE PERIL

		Pr	emiums Earn	ed		()	Los	s and Loss Ex	pense Payme	ents			12
Ye	ears in	1	2	3			Defense	and Cost	Adjusting	and Other	10	11	
	Vhich				Loss Pa		Containmer	t Payments		nents			Number of
	ums Were				4	5	6	7	8	9		Total Net	Claims
	ned and	D:			.		5		5		Salvage and		Reported
	es Were	Direct and	0 1 1	N (4 O)	Direct and	0.1.1	Direct and	0.1.1	Direct and	0.4.4		(4 - 5 + 6 - 7	Direct and
ind	curred	Assumed	Ceded	Net (1 - 2)	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Received	+ 8 - 9)	Assumed
1.	Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX
2.	2013	0	0	0	0	0	0	0	0	0	0	0	0
3.	2014	0	0	0	0	0	0	0	0	0	0	0	0
4.	2015	0	0	0	0	0	0	0	0	0	0	0	0
5.	2016	0	0	0	0	0	0	0	0	0	0	0	0
6.	2017	0	0	0	0	0	0	0	0	0	0	0	0
7.	2018	0	0	0	0	0	0	0	0	0	0	0	0
8.	2019	0	0	0	0	0	0	0	0	0	0	0	0
9.	2020	0	0	0	0	0	0	0	0	0	0	0	0
10.	2021	0	0	0	0	0	0	0	0	0	0	0	0
11.	2022	0	0	0	0	0	0	0	0	0	0	0	0
12.	Totals	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX

												23	24	25
			Losses	Unpaid		Defens	e and Cost (Containment	Unpaid	Adjusti	ng and			
		Case	Basis	Bulk +	- IBNR	Case	Basis	Bulk +	- IBNR	Other	Unpaid			
		13	14	15	16	17	18	19	20	21	22	Salvage	Total Net	Number of Claims
												and	Losses	Outstand-
		Direct		Direct		Direct		Direct		Direct		Subrog-	and	ing
		and		and		and		and		and		ation	Expenses	Direct and
<u> </u>		Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Assumed	Ceded	Anticipated	Unpaid	Assumed
1.	Prior	0	0	0	0	0	0	0	0	0	0	0	0	0
2.	2013	0	0	0	0	0	0	0	0	0	0	0	0	0
3.	2014	0	0	0	0	0	0	0	0	0	0	0	0	0
4.	2015	0	0	0	0	0	0	0	0	0	0	0	0	0
5.	2016	0	0	0	0	0	0	0	0	0	0	0	0	0
6.	2017	0	0	0	0	0	0	0	0	0	0	0	0	0
7.	2018	0	0	0	0	0	0	0	0	0	0	0	0	0
8.	2019	0	0	0	0	0	0	0	0	0	0	0	0	0
9.	2020	0	0	0	0	0	0	0	0	0	0	0	0	0
10.	2021	0	0	0	0	0	0	0	0	0	0	0	0	0
11.	2022	0	0	0	0	0	0	0	0	0	0	0	0	0
12.	Totals	0	0	0	0	0	0	0	0	0	0	0	0	0

1			Total		Loss and I	oss Expense F	Porcontago	1		34	Net Balar	nco Shoot
		Losses and	d Loss Expense	es Incurred		ed /Premiums E		Nontabula	r Discount	34		ter Discount
		26	27	28	29	30	31	32	33	Inter- Company	35	36
		Direct and			Direct and				Loss	Pooling Participation	Losses	Loss Expenses
		Assumed	Ceded	Net	Assumed	Ceded	Net	Loss	Expense	Percentage	Unpaid	Unpaid
1.	Prior	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2.	2013	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
3.	2014	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
4.	2015	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
5.	2016	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
6.	2017	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
7.	2018	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
8.	2019	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
9.	2020	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
10.	2021	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
11.	2022	0	0	0	0.0	0.0	0.0	0	0	0.0	0	0
12.	Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

Schedule P - Part 1F - Section 1 - Medical Professional Liability - Occurrence NONE

Schedule P - Part 1F - Section 2 - Medical Professional Liability - Claims-Made NONE

Schedule P - Part 1G - Special Liability (Ocean Marine, Aircraft (all perils), Boiler and Machinery)

NONE

Schedule P - Part 1H - Section 1 - Other Liability - Occurrence **NONE**

Schedule P - Part 1H - Section 2 - Other Liability - Claims-Made NONE

Schedule P - Part 1I - Special Property (Fire, Allied Lines...) **NONE**

Schedule P - Part 1J - Auto Physical Damage

NONE

Schedule P - Part 1K - Fidelity/Surety

NONE

Schedule P - Part 1L - Other (Including Credit, Accident and Health)

NONE

Schedule P - Part 1M - International

NONE

Schedule P - Part 1N - Reinsurance - Nonproportional Assumed Property

NONE

Schedule P - Part 10 - Reinsurance - Nonproportional Assumed Liability

NONE

Schedule P - Part 1P - Reinsurance - Nonproportional Assumed Financial Lines

NONE

Schedule P - Part 1R - Section 1 - Products Liability - Occurrence **NONE**

Schedule P - Part 1R - Section 2 - Products Liability - Claims-Made $\bf N$ $\bf O$ $\bf N$ $\bf E$

Schedule P - Part 1S - Financial Guaranty/Mortgage Guaranty **NONE**

Schedule P - Part 1T - Warranty **N O N E**

SCHEDULE P - PART 2A - HOMEOWNERS/FARMOWNERS

Ye	ears in	INCURRED	NET LOSSES	AND DEFEN	NSE AND CO	ST CONTAIN	MENT EXPE	NSES REPOR	RTED AT YEA	AR END (\$00)	O OMITTED)	DEVELO	PMENT
Which	h Losses	1	2	3	4	5	6	7	8	9	10	11	12
Were	Incurred	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	One Year	Two Year
1.	Prior	398	767	864	943	781	790	912	912	912	912	0	0
2.	2013	0	0	0	0	0	0	0	0	0	0	0	0
3.	2014	XXX	0	0	0	0	0	0	0	0	0	0	0
4.	2015	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5.	2016	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6.	2017	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7.	2018	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8.	2019	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(2,060)	(2,060)	(2,060)	0	0
10.	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
											12. Totals	0	0

SCHEDULE P - PART 2B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

	D.:	0	(0)	0	0	0	0	^	^	0	^	0	0
1.	Prior	0	(2)	3				0	0	0	0	0	0
2.	2013	0	0	0	0	0	0	0	0	0	0	0	0
3.	2014	XXX	0	0	0	0	0	0	0	0	0	0	0
4.	2015	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5.	2016	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6.	2017	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7.	2018	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8.	2019	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9.	2020	XXX	0	0	0	0	0						
10.	2021	XXX	0	0	0	XXX							
11.	2022	XXX	0	XXX	XXX								
											12. Totals	0	0

SCHEDULE P - PART 2C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

		COLIE		1 /111				010/11	COULT		· / WILD!	UAL	
1.	Prior												
2.	2013												
3.		XXX											
4.	2015	XXX	XXX										
5.	2016	XXX	XXX	XXX									
6.	2017	XXX	XXX	XXX	XXX			·····					
7.	2018	XXX	XXX	XXX	A X	XX	1						
8.	2019	XXX	XXX	XXX	x	XX	🗱`						
9.	2020	XXX	XXX	XXX	xxx		XXX	X					
10.	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
		•	•		•				•	•	12 Totals		

SCHEDULE P - PART 2D - WORKERS' COMPENSATION (EXCLUDING EXCESS WORKERS' COMPENSATION)

				(LXOL	ODII10 L	NOLOG I	TOINEIN	C COM	LITOATIC	<i>-</i> 111 <i>)</i>			
1.	Prior	132	132	132	142	132	132	10	10	10	10	0	0
2.	2013	0	0	0	0	0	0	0	0	0	0	0	0
3.	2014	XXX	0	0	0	0	0	0	0	0	0	0	0
4.	2015	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5.	2016	XXX	XXX	XXX	0				0	0	0	0	0
6.	2017	XXX	XXX	XXX	XXX				0	0	0	0	0
7.	2018	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8.	2019	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
10.	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	XXX
11.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX
											12. Totals	0	0

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

1.	Prior	45	32	99	97	381	286	252	252	252	252	0	0
2.	2013	0	0	0	0	0	0	0	0	0	0	0	0
3.	2014	XXX	0		_		_	0	0	0	0	0	0
4.	2015	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5.	2016	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6.	2017	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7.	2018	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8.	2019	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9.	2020	XXX	0	0	0	0	0						
10.	2021	XXX	0	0	0	XXX							
11.	2022	XXX	0	XXX	XXX								
											12. Totals	0	0

SCHEDULE P - PART 2F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

							· · · ·						
Ye	ars in	INCURRED	NET LOSSES	AND DEFEN	NSE AND CO	ST CONTAIN	MENT EXPE	NSES REPO	RTED AT YE	AR END (\$00	0 OMITTED)	DEVELO	PMENT
Which	h Losses	1	2	3	4	5	6	7	8	9	10	11	12
Were	Incurred	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	One Year	Two Year
1.	Prior												
2.	2013												
3.	2014												
4.	2015		XXX										
5.		XXX	XXX	XXX				/	• • • • • • • • • • • • • • • • • • • •				
6.	2017	XXX	XXX	XXX	. X								
7.	2018	XXX	XXX	XXX	X	X							
8.	2019	XXX	XXX	XXX	XXX		XXX						
9.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10.	2021	xxx	XXX	XXX	XXX	XXX	XXX	XXX	xxx				XXX
11.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
		•						•	•		12. Totals		

SCHEDULE P - PART 2F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

				_	_								
1.	Prior												
2.	2013												
3.	2014	XXX											
4.	2015	XXX	XXX										
5.	2016	XXX	XXX	XXX									
6.	2017	XXX	XXX	XXX	XXX								
7.	2018	XXX	XXX	XXX	. X	XX							
8.	2019	XXX	XXX	XXX	X	XX	🕸	X					
9.	2020	XXX	XXX	XXX	XXX		XXX	×					
10.	2021	XXX	XXX				XXX						
11.	2022	XXX	XXX	XXX		XXX	XXX						
											12. Totals		

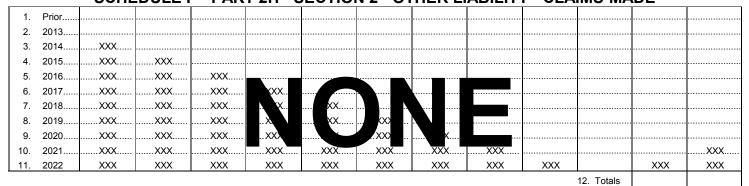
SCHEDULE P - PART 2G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

					ВΟΙ	LEK AN	ID WAC	HINEK	r)				
1.	Prior												
2.	2013												
3.	2014	XXX											
4.	2015	XXX	XXX										
5.	2016	XXX	XXX	XXX									
6.	2017	xxx	XXX	XXX	XXX								
7.	2018	xxx	XXX	XXX	. X	XX	\ \	\					
8.	2019	XXX	XXX	XXX	X	XX	\infty						
9.	2020	XXX	XXX	XXX	xxx		XXX	X					
10.	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
											12 Totals		

SCHEDULE P - PART 2H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1.	Prior	64	69	41	41	41	41	41	41	41	41	0	0
2.	2013	0	0	0	0	0	0	0	0	0	0	0	0
3.	2014	XXX	0	0	0	0	0	0	0	0	0	0	0
4.	2015	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5.	2016	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6.	2017	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7.	2018	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8.	2019	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9.	2020	XXX	0	0	0	0	0						
10.	2021	XXX	0	0	0	XXX							
11.	2022	XXX	0	XXX	XXX								
											12. Totals	0	0

SCHEDULE P - PART 2H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE



SCHEDULE P - PART 2I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)

Years in	INCURRED	NET LOSSES	AND DEFEN	NSE AND CO	ST CONTAIN	MENT EXPE	NSES REPO	RTED AT YEA	AR END (\$00	0 OMITTED)	DEVELO	PMENT
Which Losses	1	2	3	4	5	6	7	8	9	10	11	12
Were Incurred	2013	2014	2015	2016	2	201	2 9		2021	2022	One Year	Two Year
1. Prior	XXX	XXX	XXX	A X	xx.	∞ \	: x					
2. 2021	XXX	XXX	XXX	XX		. XXX	×	XXX				XXX
3. 2022	XXX	XXX	XXX	xxx	XXx	XXX	,,,x	***	XXX		xxx	xxx
										4. Totals		

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

1.	Prior	XXX	0	0	0	0	0						
2			XXX	XXX				XXX	XXX	0	0	0	XXX
3	2022	XXX	XXX	0	XXX	XXX							
	LULL	7001	7001	7001	7001	7001	7001	7001	7001		4 Totals	0	0

SCHEDULE P - PART 2K - FIDELITY/SURETY

1.	Prior	XXX	XXX	XXX	XXX		.xxx	x					
2	2021	XXX	XXX	XXX	X X	×x	oo A		VVV				XXX
3	2022	XXX	XXX	XXX	×	XX	oo	X	XXX	XXX		xxx	XXX
<u> </u>	LULL	7001	7001	7001	7.0				7001	7001	4. Totals	7000	7000

SCHEDULE P - PART 2L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

_														
1.	Prior	xxx	XXX	XXX	XXX	x		.xxx						
2	2021	xxx	XXX	YYY	X		XX		\	VVV				xxx
۷.														
3.	2022	XXX	XXX	XXX	XX Y	1 \	XX	XXX	X X	XXX	XXX		XXX	XXX
												4. Totals		

SCHEDULE P - PART 2M - INTERNATIONAL

1	Prior											
٠.	1 1101										 	
2.	2013										 	
3.	2014	XXX									 	
4.	2015	XXX	XXX								 	
5.	2016	XXX	XXX	xxx							 	
6.	2017	XXX	XXX	XXX	XX. .						 	
7.	2018	XXX	XXX	XXX		xx					 	
8.	2019	XXX	XXX	xxx	xxx		XXX				 	
9.	2020	XXX	XXX	xxx	xxx	XXX	xxx	xxx			 	
0.	2021	XXX	XXX	xxx	XXX	XXX	XXX	XXX	XXX		 	XXX
1.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

Schedule P - Part 2N - Reinsurance - Nonproportional Assumed Property NONE

Schedule P - Part 2O - Reinsurance - Nonproportional Assumed Liability

NONE

Schedule P - Part 2P - Reinsurance - Nonproportional Assumed Financial Lines

NONE

Schedule P - Part 2R - Section 1 - Products Liability - Occurrence

NONE

Schedule P - Part 2R - Section 2 - Products Liability - Claims-Made **NONE**

Schedule P - Part 2S - Financial Guaranty/Mortgage Guaranty **NONE**

Schedule P - Part 2T - Warranty **N O N E**

SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS

		CUMUL	ATIVE PAID I	NET LOSSES	AND DEFEN	ISE AND CO	ST CONTAIN	MENT EXPE	NSES REPOR	RTED AT YEA	AR END	11	12
						(\$000 OI	MITTED)					Number of	Number of
-	ars in	1	2	3	4	5	6	7	8	9	10	Claims	Claims
	/hich											Closed	Closed
	osses Vere											With	Without
	curred	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	Loss Payment	Loss Payment
			-									1 ayınıcını	1 ayınıcını
1.	Prior	000	549	607	684	781	912	912	912	912	912	4	
2.	2013	0	0	0	0	0	0	0	0	0	0	0	0
3.	2014	XXX	0	0	0	0	0	0	0	0	0	0	0
4.	2015	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5.	2016	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6.	2017	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7.	2018	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8.	2019	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(2,060)	(2,060)	(2,060)	0	0
10.	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
11.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0		

SCHEDULE P - PART 3B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1.	Prior	000	(2)	0	0	0	0	0	0	0	0	0	
2.	2013	0	0	0	0	0	0	0	0	0	0	0	0
3.	2014	XXX	0	0	0	0	0	0	0	0	0	0	0
4.	2015	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5.	2016	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6.	2017	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7.	2018	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8.	2019	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9.	2020	XXX	0	0	0	0	0						
10.	2021	XXX	0	0	0	0							
11.	2022	XXX	0										

SCHEDULE P - PART 3C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1.	Prior	000									 	
2.	2013										 	
3.	2014	XXX									 	
4.	2015	XXX	XXX								 	
5.	2016	XXX	XXX	XXX							 	
6.	2017	XXX	XXX	XXX	XXX			\			 	
7.	2018	XXX	XXX	XXX	.\ X			\			 	
8.	2019	XXX	XXX	XXX	X	XX	(XX)				 	
9.	2020	XXX	XXX	XXX	XXX		XXX	X			 	
10.	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		 	
11.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

SCHEDULE P - PART 3D - WORKERS' COMPENSATION (EXCLUDING EXCESS WORKERS' COMPENSATION)

				(,			
1.	Prior	000	0	0	10	10	10	10	10	10	10	0	
2.	2013	0	0	0	0	0	0	0	0	0	0	0	0
3.	2014	XXX	0	0	0	0	0	0	0	0	0	0	0
4.	2015	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5.	2016	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6.	2017	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7.	2018	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8.	2019	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9.	2020	XXX	0	0	0	0	0						
10.	2021	XXX	0	0	0	0							
11.	2022	XXX	0										

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1.	Prior	000	9	33	27	27	27	252	252	252	252	0	
2.	2013	0	0	0	0	0	0	0	0	0	0	0	0
3.	2014	XXX	0	0	0	0	0	0	0	0	0	0	0
4.	2015	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5.	2016	XXX	XXX	XXX	0	0	0	0	0	0	0	0	0
6.	2017	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0	0
7.	2018	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
8.	2019	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
9.	2020	XXX	0	0	0	0	0						
10.	2021	XXX	0	0	0	0							
11.	2022	XXX	0										

SCHEDULE P - PART 3F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

		CUMUL	ATIVE PAID I	NET LOSSES	AND DEFEN	SE AND CO		MENT EXPE	NSES REPOR	RTED AT YEA	AR END	11 Number of	12 Number of
Years		1	2	3	4	5	6	7	8	9	10	Claims	Claims
Whi Loss	ses											Closed With	Closed Without
We Incur		2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	Loss Payment	Loss Payment
1. P	Prior	000											
2. 2	2013												
3. 2	2014	XXX											
4. 2	2015	XXX	XXX										
5. 2	2016	XXX	XXX	XXX	A		1	\					
6. 2	2017	XXX	XXX	XXX	X								
7. 2	2018	XXX	XXX	XXX	XXX		7						
8. 2	2019	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

SCHEDULE P - PART 3F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1.	Prior	000									 	
2.	2013										 	
3.	2014	XXX									 	
4.	2015	XXX	XXX								 	
5.	2016	XXX	XXX	XXX							 	
6.	2017	XXX	XXX	XXX	XXX			.			 	
7.						xx	\ \	\			 	
8.			XXX	XXX		×x						
9.	2020	XXX	XXX	XXX	XXX		YYY	X			 	
10.	2021	XXX	XXX									
11.	2022	XXX	XXX	XXX								

SCHEDULE P - PART 3G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

1.	Prior	000									 XXX	XXX
2.	2013										 XXX	XXX
3.	2014	XXX									 XXX	XXX
4.	2015	XXX	XXX								 XXX	XXX
5.	2016	XXX	XXX	XXX							 XXX	XXX
6.	2017	XXX	XXX	XXX	XXX						 XXX	XXX
7.	2018	XXX	XXX	XXX	X X	XX					 XXX	XXX
8.		XXX				XX	🗴				 XXX	XXX
9.		XXX					.XXX	X			 XXX	XXX
10.			XXX		XXX	XXX	XXX	XXX				XXX
11.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SCHEDULE P - PART 3H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1.	Prior	000	41	41	41	41	41	41	41	41	41	0	
2.	2013	0	0	0	0	0	0	0	0	0	0		
3.	2014	XXX	0	0	0	0	0				0		
4.	2015	XXX	XXX	0	0	0	0	0	0	0	0		
5.	2016	XXX	XXX	XXX	0	0	0	0	0	0	0		
6.	2017	XXX	XXX	XXX	XXX	0	0	0	0	0	0		
7.	2018	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0		
8.	2019	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0		
9.	2020	XXX	0	0	0								
10.	2021	XXX	0	0									
11.	2022	XXX	0										

SCHEDULE P - PART 3H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

		OOIIL	DOLL	1 /111	1 011 0		12 01		ADILII			
1.	Prior	000									 	
2.	2013										 	
3.	2014	XXX									 	
4.	2015	XXX	XXX								 	
5.	2016	XXX	XXX	XXX							 	
6.	2017	XXX	XXX	XXX	XXX						 	
7.	2018	XXX	XXX	XXX	. X		\ \	\ .			 	
8.	2019	XXX	XXX	XXX	X	XX	\infty				 	
9.	2020	XXX	XXX	XXX	XXX		XXX	X			 	
10.	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		 	
11.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

SCHEDULE P - PART 3I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)

										/			
		CUMUL	ATIVE PAID I	NET LOSSES	AND DEFEN	ISE AND CO	ST CONTAIN	MENT EXPE	NSES REPOR	RTED AT YEA	AR END	11	12
						(\$000 OI	MITTED)					Number of	Number of
Υe	ars in	1	1 2 3 4 5 6 7 8 9										Claims
V	/hich												Closed
Lo	osses					With	Without						
٧	Vere					Loss	Loss						
Ind	Were Incurred 2013 2014 2015 23 117 018 2 9 2020 2021 2022								2022	Payment	Payment		
1.	Prior	XXX	XXX	XXX	XXX		XXX	X				XXX	XXX
	0004	2004	1001	1001		2004		<u> </u>	1004			2007	2004
2.	2021	XXXXXX									XXX	XXX	
	0000	2004	2004	2004	2007	2004	2004	2007	1004	100/		2007	2007
3.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

| 1. | Prior | XXX | 000 | 0 | 0 |
 |
|----|-------|-----|-----|-----|-----|-----|-----|-----|-----|-----|---|------|
| 2. | 2021 | XXX | 0 | 0 |
 |
| 3. | 2022 | XXX | 0 | |

SCHEDULE P - PART 3K - FIDELITY/SURETY

	XX	y.,		XXX	XXX	XXX	XXX	Prior	1.
xxx	kx	ΚX		κx	xxx	XXX	XXX	2021	2.
	κ×								3.
XXX XXX XXX	X	XX	\dashv	× \	 XXX	XXX	XXX	2022	3.

SCHEDULE P - PART 3L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. PriorXXXXXXXXXXXX	. XX.	x 000		xxxxxx
2. 2021XXXXXXXXX		S		xxxxxx
3. 2022 XXX XXX XXX	XXX		■ xxx	xxx xxx

SCHEDULE P - PART 3M - INTERNATIONAL

				00111	LDULL	i - i Ai	CI JIVI -	<u>- </u>		<u> </u>		
1.	Prior	000									 xxx	XXX
2.	2013										 xxx	XXX
3.	2014	XXX									 XXX	XXX
4.	2015	XXX	XXX								 XXX	XXX
5.	2016	XXX	XXX	XXX							 XXX	XXX
6.	2017	XXX	XXX	XXX	XX						 XXX	XXX
7.	2018	XXX	XXX	XXX				.			 XXX	XXX
8.	2019	XXX	XXX	XXX	xx		.xxx				 XXX	XXX
9.	2020	XXX	XXX	XXX	XXX	XXX	XXX	xxx			 xxx	XXX
10.	2021	XXX	XXX	XXX	XXX	XXX	XXX	xxx	XXX		 xxx	xxx
11.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

Schedule P - Part 3N - Reinsurance - Nonproportional Assumed Property NONE

Schedule P - Part 30 - Reinsurance - Nonproportional Assumed Liability

NONE

Schedule P - Part 3P - Reinsurance - Nonproportional Assumed Financial Lines

NONE

Schedule P - Part 3R - Section 1 - Product Liability - Occurrence

NONE

Schedule P - Part 3R - Section 2 - Product Liability - Claims-Made **NONE**

Schedule P - Part 3S - Financial Guaranty/Mortgage Guaranty **NONE**

Schedule P - Part 3T - Warranty
NONE

SCHEDULE P - PART 4A - HOMEOWNERS/FARMOWNERS

		BULK AND IE	BNR RESERVE	S ON NET LOSS	SES AND DEFE	NSE AND COST	CONTAINMEN	IT EXPENSES F	REPORTED AT	YEAR END (\$00	0 OMITTED)
	ears in	1	2	3	4	5	6	7	8	9	10
	Vhich										
	osses Vere										
	curred	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
-						2017	2010	2010	2020	2021	2022
1.	Prior	177	157	161	177	0	0	0	0	0	0
2.	2013	0	0	0	0	0	0	0	0	0	0
3.	2014	XXX	0	0	0	0	0	0	0	0	0
4.	2015	XXX	XXX	0	0	0	0	0	0	0	0
5.	2016	XXX	XXX	XXX	0	0	0	0	0	0	0
6.	2017	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7.	2018	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8.	2019	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10.	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

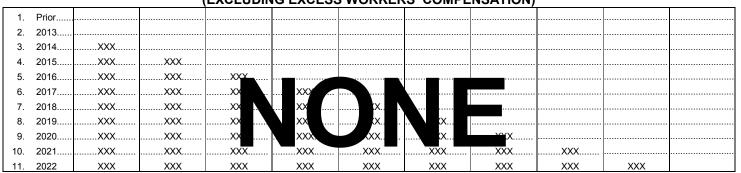
SCHEDULE P - PART 4B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1.	Prior	0	0	0	0	0	0	0	0	0	0
2.	2013	0	0	0	0	0	0	0	0	0	0
3.	2014	XXX	0	0	0	0	0	0	0	0	0
4.	2015	XXX	XXX	0	0	0	0	0	0	0	0
5.	2016	XXX	XXX	XXX	0	0	0	0	0	0	0
6.	2017	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7.	2018	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8.	2019	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9.	2020	XXX	0	0	0						
10.	2021	XXX	0	0							
11.	2022	XXX	0								

SCHEDULE P - PART 4C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1.	Prior										
2.	2013										
3.	2014	XXX									
4.	2015	XXX	XXX								
5.	2016	XXX	XXX	XX <u>X</u>							
6.	2017	XXX	XXX	XX	XXX	·····					
7.	2018	XXX	XXX	XX	××	(X I.					
8.	2019	XXX	XXX	××	xx		×				
9.	2020	XXX	XXX	XX	. XXX	XX	X	YYX			
10.	2021	XXX	XXX	xx x	XXX	XXX	XXX	XXX	XXX		
11.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4D - WORKERS' COMPENSATION (EXCLUDING EXCESS WORKERS' COMPENSATION)



SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

			OOHED	<u> </u>	/ U \ I \ T	OOM					
1.	Prior	20	18	39	48	325	25	0	0	0	0
2.	2013	0	0	0	0	0	0	0	0	0	0
3.	2014	XXX	0	0	0	0	0	0	0	0	0
4.	2015	XXX	XXX	0	0	0	0	0	0	0	0
5.	2016	XXX	XXX	XXX	0	0	0	0	0	0	0
6.	2017	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7.	2018	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8.	2019	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10.	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11	2022	YYY	YYY	YYY	YYY	YYY	XXX	XXX	YYY	YYY	0

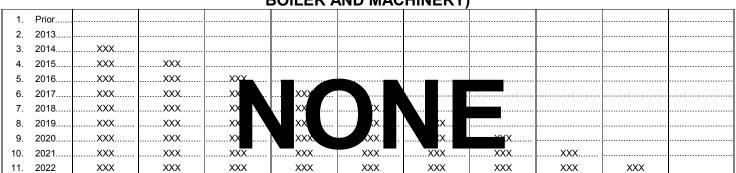
SCHEDULE P - PART 4F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

		BULK AND IE	BNR RESERVES	S ON NET LOSS	SES AND DEFE	NSE AND COST	CONTAINMEN	IT EXPENSES F	REPORTED AT	YEAR END (\$00	00 OMITTED)
V\ Lo	ears in Vhich osses Vere	1	2	3	4	5	6	7	8	9	10
	curred	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
1. 2.	Prior										
3.	2014	XXX									
4.	2015	XXX	XXX								
5.	2016	XXX	XXX	XX		X					
6.	2017	XXX	XXX	××	××						
7.	2018	XXX	XXX	XX	. XXX.						
8.	2019	XXX	XXX	XX X	XXX	XXX	XXX				
9.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10.	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1.	Prior										
2.	2013										
3.	2014	XXX									
4.	2015	XXX	XXX								
5.	2016	XXX	XXX	XX <u>X</u>							
6.	2017	XXX	XXX	XX	XXX						
7.	2018	XXX	XXX	×× 1.	xx	X.					
8.	2019	XXX	XXX	××	××		X				
9.	2020	XXX	XXX	××	. xxx	.xx	x	YY(X			
10.	2021	XXX	XXX	XXX	xxx	XXX	XXX	XXX	XXX		
11.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)



SCHEDULE P - PART 4H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1.	Prior	28	28	0	0	0	0	0	0	0	0
2.	2013	0	0	0	0	0	0	0	0	0	0
3.	2014	XXX	0	0	0	0	0	0	0	0	0
4.	2015	XXX	XXX	0	0	0	0	0	0	0	0
5.	2016	XXX	XXX	XXX	0	0	0	0	0	0	0
6.	2017	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7.	2018	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8.	2019	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9.	2020	XXX	0	0	0						
10.	2021	XXX	0	0							
11.	2022	XXX	0								

SCHEDULE P - PART 4H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

		0 0 1 1			<u> </u>	<u> </u>	— —		·		
1.	Prior										
2.	2013										
3.	2014	XXX									
4.	2015	XXX	XXX								
5.	2016	XXX	XXX	XXX							
6.	2017	XXX	XXX	XX	XXX	····					
7.	2018	XXX	XXX	XX	xx	X.	I I				
8.	2019	XXX	XXX	XX	xx		X				
9.	2020	XXX	XXX	XX	. XXX	XX	\ ×	Y X			
10.	2021	XXX	XXX	XXX	xxx	XXX	XXX	XXX	XXX		
11.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

Schedule P - Part 4I - Special Property

NONE

Schedule P - Part 4J - Auto Physical Damage

NONE

Schedule P - Part 4K - Fidelity/Surety

NONE

Schedule P - Part 4L - Other (Including Credit, Accident and Health)

NONE

Schedule P - Part 4M - International

NONE

Schedule P - Part 4N - Reinsurance - Nonproportional Assumed Property

NONE

Schedule P - Part 4O - Reinsurance - Nonproportional Assumed Liability

NONE

Schedule P - Part 4P - Reinsurance - Nonproportional Assumed Financial Lines

NONE

Schedule P - Part 4R - Section 1 - Products Liability - Occurrence

NONE

Schedule P - Part 4R - Section 2 - Products Liability - Claims-Made

NONE

Schedule P - Part 4S - Financial Guaranty/Mortgage Guaranty

NONE

Schedule P - Part 4T - Warranty

NONE

SCHEDULE P - PART 5A - HOMEOWNERS/FARMOWNERS SECTION 1

			CUMULA	ATIVE NUMBER	OF CLAIMS CL	OSED WITH LC	SS PAYMENT I	DIRECT AND AS	SSUMED AT YE	AR END	
	in Which	1	2	3	4	5	6	7	8	9	10
	miums										
	Earned										
	Losses Incurred	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
*****	inounca	2010	2011	2010	2010	2011	2010	2010	2020	2021	2022
1.	Prior	1	0	2	0	1	0	1	0	0	
2.	2013	0	0	0	0	0	0	0	0	0	0
3.	2014	XXX	0	0	0	0	0	0	0	0	0
4.	2015	XXX	XXX	0	0	0	0	0	0	0	0
5.	2016	XXX	XXX	XXX	0	0	0	0	0	0	0
6.	2017	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7.	2018	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8.	2019	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10.	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0
11.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2

NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END											
				AR END							
Pre Were	in Which emiums e Earned Losses	1	2	3	4	5	6	7	8	9	10
	Incurred	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
1.	Prior	9	4	5	4	0	0	0	0	0	
2.	2013	0	0	0	0	0	0	0	0		
3.	2014	XXX	0	0	0	0	0	0	0		
4.	2015	XXX	XXX	0	0	0	0	0	0		
5.	2016	XXX	XXX	XXX	0	0	0	0	0		
6.	2017	XXX	XXX	XXX	XXX	0	0	0	0		
7.	2018	XXX	XXX	XXX	XXX	XXX	0	0	0		
8.	2019	XXX	XXX	XXX	XXX	XXX	XXX	0	0		
9.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0		
10.	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

							9				
				CUMULATIVE	NUMBER OF C	CLAIMS REPOR	TED DIRECT AN	ND ASSUMED A	AT YEAR END		
	in Which miums	1	2	3	4	5	6	7	8	9	10
Were	Earned Losses										
Were	Incurred	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
1.	Prior	2	(5)	3	1	0	0	1	0	0	
2.	2013	0	0	0	0	0	0	0	0	0	
3.	2014	XXX	0	0	0	0	0	0	0	0	
4.	2015	XXX	XXX	0	0	0	0	0	0	0	
5.	2016	XXX	XXX	XXX	0	0	0	0	0	0	•
6.	2017	XXX	XXX	XXX	XXX	0	0	0	0	0	
7.	2018	XXX	XXX	XXX	XXX	XXX	0	0	0	0	•
8.	2019	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	•
9.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
10.	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
11	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 5B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL SECTION 1

			CUMULA	ATIVE NUMBER	OF CLAIMS CL	OSED WITH LC	SS PAYMENT	DIRECT AND AS	SSUMED AT YE	AR END	
	in Which	1	2	3	4	5	6	7	8	9	10
	miums										
	Earned Losses										
	Incurred	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
		= 7.17									
1.	Prior	0	0	0	0	0	0	0	0	0	
2.	2013	0	0	0	0	0	0	0	0	0	0
3.	2014	XXX	0	0	0	0	0	0	0	0	0
4.	2015	XXX	XXX	0	0	0	0	0	0	0	0
5.	2016	XXX	XXX	XXX	0	0	0	0	0	0	0
6.	2017	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7.	2018	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8.	2019	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10.	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0
11.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2

NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END											
				SSUMED AT YE	AR END						
Pre Were	in Which miums Earned Losses	1	2	3	4	5	6	7	8	9	10
	Incurred	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
1.	Prior	0	0	1	0	0	0	0	0	0	
2.	2013	0	0	0	0	0	0	0	0		
3.	2014	XXX	0	0	0	0	0	0	0		
4.	2015	XXX	XXX	0	0	0	0	0	0		
5.	2016	XXX	XXX	XXX	0	0	0	0	0		
6.	2017	XXX	XXX	XXX	XXX	0	0	0	0		
7.	2018	XXX	XXX	XXX	XXX	XXX	0	0	0		
8.	2019	XXX	XXX	XXX	XXX	XXX	XXX	0	0		
9.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0		
10.	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

							9				
				CUMULATIVE	NUMBER OF C	CLAIMS REPOR	TED DIRECT A	ND ASSUMED A	AT YEAR END		
Pre	in Which miums	1	2	3	4	5	6	7	8	9	10
and	Earned Losses	2042	0044	2045	0040	0047	2040	2010	2020	2024	2022
vvere	Incurred	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
1.	Prior	0	0	1	0	0	0	0	0	0	
2.	2013	0	0	0	0	0	0	0	0	0	
3.	2014	XXX	0	0	0	0	0	0	0	0	
4.	2015	XXX	XXX	0	0	0	0	0	0	0	
5.	2016	XXX	XXX	XXX	0	0	0	0	0	0	
6.	2017	XXX	XXX	XXX	XXX	0	0	0	0	0	
7.	2018	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
8.	2019	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
9.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
10.	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
11	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 1 NONE

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 2

NONE

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 3 **NONE**

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 1

NONE

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 2 **NONE**

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 3 **NONE**

SCHEDULE P - PART 5E - COMMERCIAL MULTIPLE PERIL SECTION 1

		CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END											
	in Which	1	2	3	4	5	6	7	8	9	10		
Were	emiums e Earned Losses												
	Incurred	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022		
1.	Prior	1	0	0	0	0	0	0	0	0			
2.	2013	0	0	0	0	0	0	0	0	0	0		
3.	2014	XXX	0	0	0	0	0	0	0	0	0		
4.	2015	XXX	XXX	0	0	0	0	0	0	0	0		
5.	2016	XXX	XXX	XXX	0	0	0	0	0	0	0		
6.	2017	XXX	XXX	XXX	XXX	0	0	0	0	0	0		
7.	2018	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0		
8.	2019	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0		
9.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0		
10.	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0		
11.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

SECTION 2

				NUMBER	R OF CLAIMS O	UTSTANDING [DIRECT AND AS	SSUMED AT YE	AR END		
Pre Were	in Which miums Earned Losses	1	2	3	4	5	6	7	8	9	10
	Incurred	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
1.	Prior	1	0	1	1	1	1	0	0	0	
2.	2013	0	0	0	0	0	0	0	0		
3.	2014	XXX	0	0	0	0	0	0	0		
4.	2015	XXX	XXX	0	0	0	0	0	0		
5.	2016	XXX	XXX	XXX	0	0	0	0	0		
6.	2017	XXX	XXX	XXX	XXX	0	0	0	0		
7.	2018	XXX	XXX	XXX	XXX	XXX	0	0	0		
8.	2019	XXX	XXX	XXX	XXX	XXX	XXX	0	0		
9.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0		
10.	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

					<u> </u>	ECTION .	<u> </u>				
				CUMULATIVE	NUMBER OF C	LAIMS REPOR	TED DIRECT A	ND ASSUMED A	T YEAR END		
Pre Were	in Which miums Earned Losses	1	2	3	4	5	6	7	8	9	10
	Incurred	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
1.	Prior	1	(1)	1	0	0	0	(1)	0	0	(
2.	2013	0	0	0	0	0	0	0	0	0	
3.	2014	XXX	0	0	0	0	0	0	0	0	
4.	2015	XXX	XXX	0	0	0	0	0	0	0	
5.	2016	XXX	XXX	XXX	0	0	0	0	0	0	
6.	2017	XXX	XXX	XXX	XXX	0	0	0	0	0	
7.	2018	XXX	XXX	XXX	XXX	XXX	0	0	0	0	
8.	2019	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	
9.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	
10.	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	
11.	2022	xxx	XXX	XXX	XXX	XXX	XXX	XXX	XXX	xxx	

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 1A NONE

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 2A

NONE

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 3A NONE

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 1B **NONE**

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 2B **NONE**

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 3B NONE

SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE SECTION 1A

Ye	ars in	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END												
	in Which	1	2	3	4	5	6	7	8	9	10			
Were	miums Earned													
	Losses Incurred	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022			
1.	Prior	1	0	0	0	0	0	0	0	0				
2.	2013	0	0	0	0	0	0	0	0					
3.	2014	XXX	0	0	0	0	0	0	0					
4.	2015	XXX	XXX	0	0	0	0	0	0					
5.	2016	XXX	XXX	XXX	0	0	0	0	0					
6.	2017	XXX	XXX	XXX	XXX	0	0	0	0					
7.	2018	XXX	XXX	XXX	XXX	XXX	0	0	0					
8.	2019	XXX	XXX	XXX	XXX	XXX	XXX	0	0					
9.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0					
10.	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
11.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				

SECTION 2A

					OL	_C 2					
Υe	ears in			NUMBER	R OF CLAIMS O	UTSTANDING [DIRECT AND AS	SSUMED AT YE	AR END		
Pre Were	in Which miums E Earned	1	2	3	4	5	6	7	8	9	10
	Losses Incurred	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
1.	Prior	1	0	0	0	0	0	0	0	0	
2.	2013	0	0	0	0	0	0	0	0		
3.	2014	XXX	0	0	0	0	0	0	0		
4.	2015	XXX	XXX	0	0	0	0	0	0		
5.	2016	XXX	XXX	XXX	0	0	0	0	0		
6.	2017	XXX	XXX	XXX	XXX	0	0	0	0		
7.	2018	XXX	XXX	XXX	XXX	XXX	0	0	0		
8.	2019	XXX	XXX	XXX	XXX	XXX	XXX	0	0		
9.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0		
10.	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3A

					JL	CHONS	A				
Υe	ears in			CUMULATIVE	NUMBER OF C	LAIMS REPOR	TED DIRECT A	ND ASSUMED A	AT YEAR END		
Pre Were	in Which emiums e Earned Losses	1	2	3	4	5	6	7	8	9	10
	Incurred	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
1.	Prior	0	(1)	0	0	0	0	0	0	0	(
2.	2013	0	0	0	0	0	0	0	0		
3.	2014	XXX	0	0	0	0	0	0	0		
4.	2015	XXX	XXX	0	0	0	0	0	0		
5.	2016	XXX	XXX	XXX	0	0	0	0	0		
6.	2017	XXX	XXX	XXX	XXX	0	0	0	0		
7.	2018	XXX	XXX	XXX	XXX	XXX	0	0	0		
8.	2019	XXX	XXX	XXX	XXX	XXX	XXX	0	0		
9.	2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0		
10.	2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11.	2022	xxx	XXX	XXX	XXX	XXX	XXX	xxx	XXX	xxx	

Schedule P - Part 5H - Other Liability - Claims-Made - Section 1B **NONE**

Schedule P - Part 5H - Other Liability - Claims-Made - Section 2B **NONE**

Schedule P - Part 5H - Other Liability - Claims-Made - Section 3B **N O N E**

Schedule P - Part 5R - Products Liability - Occurrence - Section 1A **NONE**

Schedule P - Part 5R - Products Liability - Occurrence - Section 2A

NONE

Schedule P - Part 5R - Products Liability - Occurrence - Section 3A NONE

Schedule P - Part 5R - Products Liability - Claims-Made - Section 1B **NONE**

Schedule P - Part 5R - Products Liability - Claims-Made - Section 2B **NONE**

Schedule P - Part 5R - Products Liability - Claims-Made - Section 3B NONE

Schedule P - Part 5T - Warranty - Section 1 **NONE**

Schedule P - Part 5T - Warranty - Section 2 **NONE**

Schedule P - Part 5T - Warranty - Section 3 **N O N E**

Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical - Section 1

NONE

Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical - Section 2

NONE

Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 1 NONE

Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 2

NONE

Schedule P - Part 6E - Commercial Multiple Peril - Section 1

NONE

Schedule P - Part 6E - Commercial Multiple Peril - Section 2

NONE

Schedule P - Part 6H - Other Liability - Occurrence - Section 1A

NONE

Schedule P - Part 6H - Other Liability - Occurrence - Section 2A

NONE

Schedule P - Part 6H - Other Liability - Claims-Made - Section 1B **NONE**

Schedule P - Part 6H - Other Liability - Claims-Made - Section 2B **N O N E**

Schedule P - Part 6M - International - Section 1 **NONE**

Schedule P - Part 6M - International - Section 2 **NONE**

Schedule P - Part 6N- Reinsurance A - Nonproportional Assumed Property - Section 1

NONE

Schedule P - Part 6N- Reinsurance A - Nonproportional Assumed Property - Section 2 **NONE**

Schedule P - Part 6O - Reinsurance B - Nonproportional Liability - Section 1

NONE

Schedule P - Part 6O - Reinsurance B - Nonproportional Assumed Liability - Section 2 **NONE**

Schedule P - Part 6R - Products Liability - Occurrence - Section 1A **NONE**

- Schedule P Part 6R Products Liability Occurrence Section 2A

 NONE
- Schedule P Part 6R Products Liability Claims-Made Section 1B **N O N E**
- Schedule P Part 6R Products Liability Claims-Made Section 2B **N O N E**
- Schedule P Part 7A Section 1 Primary Loss Sensitive Contracts

 NONE
- Schedule P Part 7A Section 2 Primary Loss Sensitive Contracts **NONE**
- Schedule P Part 7A Section 3 Primary Loss Sensitive Contracts

 NONE
- Schedule P Part 7A Section 4 Primary Loss Sensitive Contracts **NONE**
- Schedule P Part 7A Section 5 Primary Loss Sensitive Contracts

 NONE
- Schedule P Part 7B Section 1 Reinsurance Loss Sensitive Contracts **NONE**
- Schedule P Part 7B Section 2 Reinsurance Loss Sensitive Contracts

 NONE
- Schedule P Part 7B Section 3 Reinsurance Loss Sensitive Contracts **NONE**
- Schedule P Part 7B Section 4 Reinsurance Loss Sensitive Contracts **N O N E**
- Schedule P Part 7B Section 5 Reinsurance Loss Sensitive Contracts **NONE**

Schedule P - Part 7B - Section 6 - Reinsurance Loss Sensitive Contracts $\bf N$ $\bf O$ $\bf N$ $\bf E$

Schedule P - Part 7B - Section 7 - Reinsurance Loss Sensitive Contracts ${f N}$ ${f O}$ ${f N}$ ${f E}$

SCHEDULE P INTERROGATORIES

1.	The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from D Professional Liability Claims Made insurance policies. EREs provided for reasons other than DDR are not to the contract of the contra)R) provisio	ns in M	/ledical
1.1	Does the company issue Medical Professional Liability Claims Made insurance policies that provide tail (also endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge If the answer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "ye questions:	or at no additional cost?] No	[X]
1.2	What is the total amount of the reserve for that provision (DDR Reserve), as reported, explicitly or not, elsev dollars)?		i		
1.3	Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65?		. Yes [] No	[X]
1.4	Does the company report any DDR reserve as loss or loss adjustment expense reserve?		. Yes [] No	[X]
1.5	If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on Investment Exhibit, Part 1A - Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2?	the Underwriting and Yes	; [] No	[]	N/A [
1.6	If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the follow in Schedule P:	ving table corresponding to where	these rese	rves are	e reported
		DDR Reserve I Schedule P, Part 1F, Medic Column 24: Total Net Losse:	al Profession	onal Lia enses U	
	Years in Which Premiums Were Earned and Losses Were Incurred	1 Section 1: Occurrence	Section 2	2 : Claims	s-Made
	Prior				
	2013				
	2014 2015				
	2016				
	2017				
	2018				
	2019				
	2020				
	2022				
	Totals	0			0
3.	The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment experience of the definition applies to both paid and unpaid expenses. Are these of Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in the Adjusting and Other expense payments and reserves should be allocated to the years in which the loss number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsur Other expense incurred by reinsurers, or in those situations where suitable claim count information is not a expense should be allocated by a reasonable method determined by the company and described in Interrographs of the Company and described in Interrographs.	expenses (now reported as " in this statement? ses were incurred based on the xpense between companies in a closs amounts and the claim rance contract. For Adjusting and vailable, Adjusting and Other gatory 7, below. Are they so		X] No	
4.	Po any lines in Schedule P include reserves that are reported gross of any discount to present value of future.	re payments, and that are reported	i .	-	
	net of such discounts on Page 10? If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions reported in Schedule P - Part 1, Columns 32 and 33. Schedule P must be completed gross of non-tabular relating to discount calculations must be available for examination upon request. Discounting is allowed only if expressly permitted by the state insurance department to which this Annual St. being filed.	s. Also, the discounts must be discounting. Work papers	. Yes [] No) [X]
5.	What were the net premiums in force at the end of the year for:				
		ity			
	5.2 Sure	ty			
6.	Claim count information is reported per claim or per claimant (Indicate which)		per ciaim.		
7.1	The information provided in Schedule P will be used by many persons to estimate the adequacy of the curre among other things. Are there any especially significant events, coverage, retention or accounting changes considered when making such analyses?	s that have occurred that must be] No) [X]
7.2	(An extended statement may be attached.)				

Schedule T - Part 2 - Interstate Compact NONE

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
											Type	lf		1	
											of Control	Control		1	
											(Ownership,	is		Is an	
						Name of Securities			Relation-		Board.	Owner-		SCA	
						Exchange		Domi-	ship		Management,	ship		Filing	
		NAIC				if Publicly Traded	Names of	ciliary	to		Attorney-in-Fact.	Provide		Re-	
Croup			ID	Federal		(U.S. or	Parent, Subsidiaries	,	Reporting	Directly Controlled by	Influence.	Percen-	Ultimate Controlling	auired?	,
Group Code	Group Name	Company Code	Number	RSSD	CIK	International)	Or Affiliates	Loca- tion	Entity	(Name of Entity/Person)	Other)			(Yes/No)	
	Group Name		Number	RSSD						, ,	/	tage	Entity(ies)/Person(s)		,
. 0000		00000			0001598665	NYSE	Heritage Insurance Holdings, Inc.	DE	UDP	Board of Directors	Board of Directors	0.000		NO	0
4004		44407	40.0004000				Heritage Property & Casualty Insurance	FL	RE					NO	
	Heritage Ins Holdings Grp		46-0694063				Company			ge,ea.age,	Ownership		Heritage Insurance Holdings, Inc		
. 0000		00000	46-0614061				Heritage MGA, LLC			Heritage Insurance Holdings, Inc	Ownership		Heritage Insurance Holdings, Inc		
. 0000		00000	46-0711647				Heritage Insurance Claims, LLC	FL		Heritage Insurance Holdings, Inc	Ownership		Heritage Insurance Holdings, Inc		
. 0000			90-0917421				Contractors' Alliance Network, LLC				Ownership		Heritage Insurance Holdings, Inc		
. 0000			98-1109773				Osprey Re LTD.	BMU		Heritage Insurance Holdings, Inc	Ownership		Heritage Insurance Holdings, Inc		
. 0000			80-0904526				Skye Lane Properties, LLC	FL		Heritage Insurance Holdings, Inc	Ownership		Heritage Insurance Holdings, Inc	NO	0
. 4861	Heritage Ins Holdings Grp	11026	99-0344514				Zephyr Insurance Company, Inc			HI Holdins, Inc	Ownership		Heritage Insurance Holdings, Inc		
. 0000		00000	94-3332555				HI Holdings, Inc			Zephyr Acquisition Company	Ownership		Heritage Insurance Holdings, Inc	NO	0
. 0000		00000	27-0818506				Zephyr Acquisition Company	DE	NIA	Heritage Insurance Holdings, Inc	Ownership	100.000	Heritage Insurance Holdings, Inc	NO	0
. 0000		00000	26-1736008				NBIC Holdings, Inc.	DE	NIA	Heritage Insurance Holdings, Inc	Ownership	100.000	Heritage Insurance Holdings, Inc	NO	0
. 0000		00000	20-3179005			l	NBIC Financial Holdings, Inc	RI	NIA	NBIC Holdings, Inc.	Ownership		Heritage Insurance Holdings, Inc	NO	0
. 0000			26-3867627				NBIC Service Company, Inc.			NBIC Holdings, Inc.	Ownership		Heritage Insurance Holdings, Inc	NO	0
. 4861	Heritage Ins Holdings Grp	43001	05-0394576				Narragansett Bay Insurance Company	RI		NBIC Financial Holdings, Inc	Ownership		Heritage Insurance Holdings, Inc	NO	0
	Heritage Ins Holdings Grp		05-0197250				Pawtucket Insurance Company	RI	IA	Narragansett Bay Insurance Company	Owner ship		Heritage Insurance Holdings, Inc	NO	0
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Asterisk	Explanation

SCHEDULE Y

PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

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						Income/						
						(Disbursements)						
					Purchases, Sales	Incurred in						Reinsurance
					or Exchanges of	Connection with		Income/		Any Other Material		Recoverable/
					Loans, Securities,	Guarantees or		(Disbursements)		Activity Not in the		(Payable) on
NAIC					Real Estate,	Undertakings for	Management	Incurred Under		Ordinary Course of		Losses and/or
Company	ID	Names of Insurers and Parent,	Shareholder	Capital	Mortgage Loans or	the Benefit of any	Agreements and	Reinsurance		the Insurer's		Reserve Credit
Code	Number	Subsidiaries or Affiliates	Dividends	Contributions	Other Investments	Affiliate(s)	Service Contracts	Agreements	*	Business	Totals	Taken/(Liability)
14407	. 46-0694063	. Heritage Property & Casualty Insurance										
		Company		6,061,313	9, 165, 438		(191,086,364)				(139,247,582)	
	. 46-0614061	. Heritage MGA, LLC		, ,	, , , , , , , , , , , , , , , , , , ,		118,381,902				118,381,902	
	45-5338504	Heritage Insurance Holdings, Inc.		(6 061 313)	(3 350 393)		(1,000,000)				(10,411,706)	
		Skye Lane Properties, LLC		(0,001,010)	(0,000,000)		37 487					
		Osprey Re LTD.				•••••		(24,237,031)				
	. 90-0917421	Contractors' Alliance Network, LLC					107 007 004	(24,237,031)				
44000		. Contractors' Alliance Network, LLC	(4.000.044)				107,237,924				107 ,237 ,924	
	. 99–0344514	Zephyr Insurance Company, Inc	(4,286,341)				(3, 188, 749)	(1,824,606)			(9,299,696)	
	. 27-0818506	Zephyr Acquisition Company	4,286,341		(5,815,045)						(1,528,704)	
43001		Narragansett Bay Insurance Company		5,000,000			(65,892,438)	(10,550,394)			(71,442,832)	
14931		Pawtucket Insurance Company									0	
	. 26-3867627	NBIC Service Company, Inc.	l				35.510.238				35.510.238	
	. 26-1736008	NBIC Holdings, Inc.		(5 000 000)			, ,				(5,000,000)	
						•••••						
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9999999 Co	ontrol Totals		0	0	0	0	0	0	XXX	0	0	0
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SCHEDULE Y

PART 3 - ULTIMATE CONTROLLING PARTY AND LISTING OF OTHER U.S. INSURANCE GROUPS OR ENTITIES UNDER THAT ULTIMATE CONTROLLING PARTY'S CONTROL

PART 3 - ULTIMATE CONTROL	LING PARTY AND LISTING OF O	THER U.S. INSUR	RANCE	E GROUPS OR ENTITIES UNDER	THAT ULTIMATE CONTROLLING F	'ARTY'S CON	IROL
1	2	3	4	5	6	7	8
			Granted			1	Granted
		Di	isclaimer			1	Disclaimer
			f Control\			1	of Control\
		Aff	ffiliation of			1	Affiliation of
			Column 2			Ownership	Column 5
			Over			Percentage	Over
			Column 1		U.S. Insurance Groups or Entities Controlled	(Column 5 of	Column 6
Insurers in Holding Company	Owners with Greater Than 10% Ownership	,	(Yes/No)	Ultimate Controlling Party	by Column 5	Column 6)	(Yes/No)
Heritage Property & Casualty Insurance Company	Heritage Insurance Holdings, Inc	100.000			Heritage Insurance Holdings, Inc	100.000	
Narragansett Bay Insurance Company	NBIC Financial Holdings, Inc	100.000	NO		Heritage Insurance Holdings, Inc	100.000	
Pawtucket Insurance Company	Narragansett Bay Insurance Company	100.000	NO	Heritage Insurance Holdings, Inc	Heritage Insurance Holdings, Inc	100.000	NO
Zephyr Insurance Company, Inc.	HI Holdings, Inc.	100.000			Heritage Insurance Holdings, Inc.		NO
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SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

REQUIRED FILINGS

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of **WAIVED** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

		Responses
	MARCH FILING	
1.	Will an actuarial opinion be filed by March 1?	WAIVED
2.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
3.	Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
4.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1?	YES
5.	Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
6.	Will Management's Discussion and Analysis be filed by April 1?	YES
7.	Will the Supplemental Investment Risk Interrogatories be filed by April 1?	YES
	MAY FILING	
8.	Will this company be included in a combined annual statement which is filed with the NAIC by May 1?	YES
9.	Will an audited financial report be filed by June 1?	YES
10.	Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES

SUPPLEMENTAL FILINGS

The following supplemental reports are required to be filed as part of your annual statement filing if your company is engaged in the type of business covered by the supplement. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

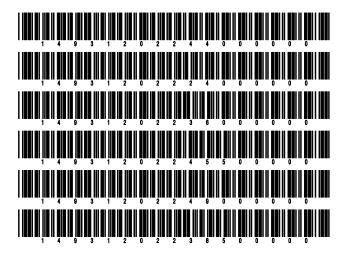
MARCH FILING

	MARCH FILING	
11.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	YES
12.	Will the Financial Guaranty Insurance Exhibit be filed by March 1?	NO
13.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
14.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	NO
15.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
16.	Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	NO
17.	Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	NO
18.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
19.	Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	NO
20.	Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	NO
21.	Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	NO
22.	Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	NO
23.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
24.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed	
	electronically with the NAIC by March 1?	NO
25.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed	
	electronically with the NAIC by March 1?	NO
26.	Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically	
	with the NAIC by March 1?	NO
27.		
	of domicile and the NAIC by March 1?	NO
	APRIL FILING	
28.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
29.	Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
30.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	NO
31.	Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	NO
32.	Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the	
	NAIC by April 1?	NO
33.	Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1?	NO
34.	Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the	
	NAIC by April 1?	NO
35.	Will the Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1?	NO
36.	Will the Mortgage Guaranty Insurance Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
	AUGUST FILING	
37.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	YES

Bar Codes:

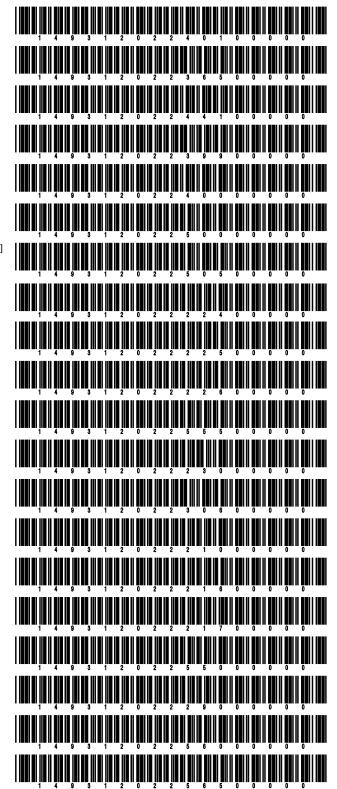
12. 13. 14. 15. 16. 17. 18. 20. 21. 22. 23. 24. 25. 26. 27. 28. 29. 30. 31. 32. 33. 34. 35.

- Actuarial Opinion [Document Identifier 440]
- 12. Financial Guaranty Insurance Exhibit [Document Identifier 240]
- 13. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]
- 14. Supplement A to Schedule T [Document Identifier 455]
- 15. Trusteed Surplus Statement [Document Identifier 490]
- 16. Premiums Attributed to Protected Cells Exhibit [Document Identifier 385]



SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

- 17. Reinsurance Summary Supplemental Filing [Document Identifier 401]
- 18. Medicare Part D Coverage Supplement [Document Identifier 365]
- 19. Actuarial Opinion Summary (AOS) [Document Identifier 441]
- 20. Reinsurance Attestation Supplement [Document Identifier 399]
- 21. Exceptions to the Reinsurance Attestation Supplement [Document Identifier 400]
- 22. Bail Bond Supplement [Document Identifier 500]
- 23. Director and Officer Insurance Coverage Supplement [Document Identifier 505]
- 24. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]
- 25. Relief from the one-year cooling off period for independent CPA [Document Identifier 225]
- 26. Relief from the Requirements for Audit Committees [Document Identifier 226]
- Reinsurance Counterparty Reporting Exception Asbestos and Pollution Contracts [Document Identifier 555]
- 28. Credit Insurance Experience Exhibit [Document Identifier 230]
- 29. Long-Term Care Experience Reporting Forms [Document Identifier 306]
- 30. Accident and Health Policy Experience Exhibit [Document Identifier 210]
- 31. Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216]
- Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217]
- 33. Cybersecurity and Identity Theft Insurance Coverage Supplement [Document Identifier 550]
- 34. Life, Health & Annuity Guaranty Association Assessable Premium Exhibit Parts 1 and 2 [Document Identifier 290]
- 35. Private Flood Insurance Supplement [Document Identifier 560]
- 36. Will the Mortgage Guaranty Insurance Exhibit [Document Identifier 565]



OVERFLOW PAGE FOR WRITE-INS

| Additional Write-ins for Assets Line 25 | | | | | | | | |
|---|---|--------------|--------------------|---------------------|--------------|--|--|--|
| | | Current Year | | | Prior Year | | | |
| | | 1 | 2 | 3 | 4 | | | |
| | | | | Net Admitted Assets | Net Admitted | | | |
| | | Assets | Nonadmitted Assets | (Cols. 1 - 2) | Assets | | | |
| 2504. | | | | 0 | 0 | | | |
| 2505. | | | | 0 | 0 | | | |
| 2597. | Summary of remaining write-ins for Line 25 from overflow page | 0 | 0 | 0 | 0 | | | |